

# **Safeguarding Vulnerable Adults Policy**

**Reviewed June 2024**

# **Safeguarding Vulnerable Adults**

## **The purpose and scope of this policy statement**

Adfam works with adult clients as part of its activities. These include: projects supporting family members on a one-to-one basis, or in groups. At times these adults may have particular vulnerabilities arising from: age or infirmity; mental or physical ill-health; physical or mental disability.

The purpose of this policy statement is:

- To protect vulnerable adults who receive Adfam's services. This includes the vulnerable adult family members of those directly in contact with Adfam.
- To provide family members we work with (henceforth referred to as 'clients') with the overarching principles that guide our approach to safeguarding vulnerable adults. This policy statement applies to anyone working on behalf of Adfam, including senior managers and the board of trustees, paid staff, volunteers, sessional workers, agency staff, students and interns.

## **Legal framework**

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect vulnerable adults in England. A summary of the key legislation and guidance is available from <https://www.anncrafttrust.org/resources/safeguarding-adults-legislation/>.

## Policy Statement

This policy statement should be read alongside our organisational policies and procedures, including:

- Procedures for responding to concerns about a vulnerable adult's wellbeing
- Dealing with allegations of abuse against a vulnerable adult
- Role of the designated safeguarding officer
- Managing allegations against staff and volunteers
- Safer recruitment policy and procedures
- Code of conduct for staff and volunteers
- Anti-bullying policy and procedures
- Online safety policy and procedures for responding to concerns about online abuse
- Photography and image sharing guidance
- Client records retention and storage policy
- Whistleblowing policy
- \* Health and Safety policy

## Statement

We believe that:

- No vulnerable adult should experience abuse of any kind.
- We have a responsibility to promote the welfare of those we work with, including those adults with characteristics which make them especially vulnerable.

We recognise that:

- The welfare of vulnerable adults is paramount.
- All vulnerable adults, regardless of age, disability, gender reassignment, race, religion or belief, sex, or sexual orientation have a right to equal protection from all types of harm or abuse.

We will seek to keep vulnerable adults safe by:

- Valuing, listening to and respecting them.
- Appointing a nominated safeguarding lead, a deputy safeguarding lead and a lead trustee/board member for safeguarding.
- Developing safeguarding policies and procedures which reflect best practice.
- Using our safeguarding procedures to share concerns and relevant information with agencies who need to know, and involving carers or other adult family members appropriately.
- Creating and maintaining an anti-bullying environment and ensuring that we have a policy and procedure to help us deal effectively with any bullying that does arise.
- Developing and implementing an effective online safety policy and related procedures.
- Sharing information about safeguarding best practice in our group work with adults and other relevant contexts.
- Recruiting staff and volunteers safely, ensuring all necessary checks are made.
- Providing effective management for staff and volunteers through supervision, support, training and quality assurance measures.
- Providing Safeguarding training to all staff and volunteers, and refresher training at least annually to those working directly with clients and every 3 years to all staff.

- Implementing a code of conduct for staff and volunteers.
- Using our procedures to manage any allegations against staff and volunteers appropriately.
- Ensuring that we have effective complaints and whistleblowing measures in place
- Ensuring that we provide a safe physical environment for all our clients, staff and volunteers, by applying health and safety measures in accordance with the law and regulatory guidance.
- Recording and storing information professionally and securely.

### **Contact details**

Nominated safeguarding lead: Vivienne Evans

Phone/email: 07889 281076 / [v.evans@adfam.org.uk](mailto:v.evans@adfam.org.uk)

Deputy safeguarding lead: Kersti Dolphin

Phone/email: 07966 186286 / [k.dolphin@adfam.org.uk](mailto:k.dolphin@adfam.org.uk)

Deputy safeguarding lead: Rebekah Allon-Smith

Phone / email: 07753 218450 / [r.allon-smith@adfam.org.uk](mailto:r.allon-smith@adfam.org.uk)

James Armstrong

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We are committed to reviewing our policy and good practice annually. This policy was last reviewed in June 2024

Signed: ..... [this should be signed by the most senior person with responsibility for safeguarding in your organisation, for example the safeguarding lead on your board of trustees]. Date: .....

## **Who is a Vulnerable Adult?**

### **Vulnerable Adult Definition**

"A person who is 18 years of age or over, and who is or may be in need of community care services by reason of mental or other disability, age or illness and who is or may be unable to take care of him/herself, or unable to protect him/herself against significant harm or serious exploitation."

(Law Commission - Who Decides?: Making decisions on behalf of mentally incapacitated adults 1997)

### **Characteristics of a Vulnerable Adult:**

Is elderly and frail due to ill health, physical disability or cognitive impairment

Has a learning disability

Has a physical disability and / or a sensory impairment

Has mental health needs including dementia or a personality disorder

Has a long-term illness / condition

Misuses substances or alcohol

Is a carer, where the person meets the definition

Is unable to demonstrate the capacity to make a decision and is in need of care and support.

With thanks to [www.wbsb.co.uk](http://www.wbsb.co.uk)

## **Safeguarding Procedures**

### **Procedures for responding to concerns about the wellbeing of a vulnerable adult**

This procedure applies to any paid member of staff or volunteer who may be concerned about the safety of a vulnerable adult.

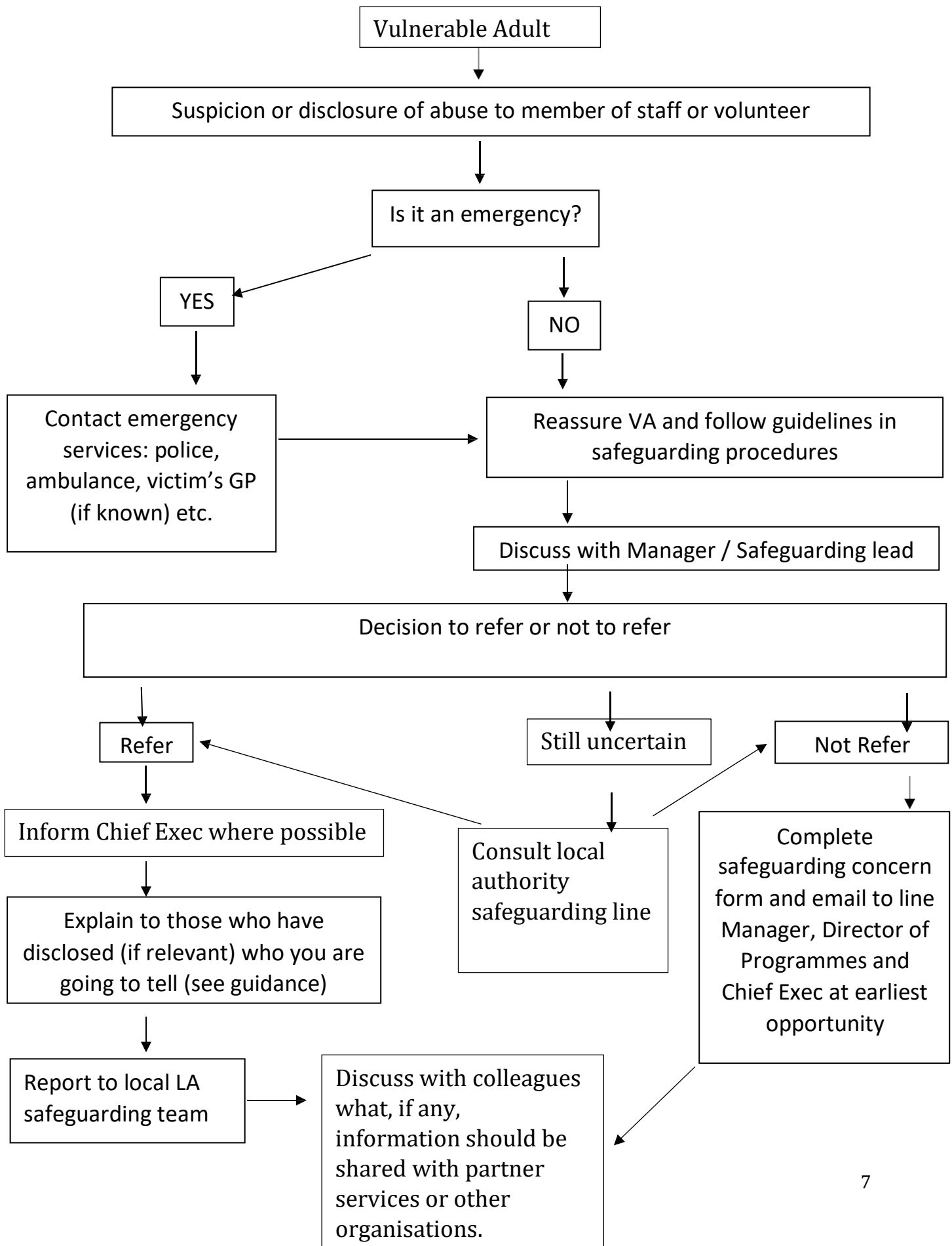
#### **Purpose and aim of this procedure**

We aim to ensure that vulnerable adults who come into contact with Adfam projects, receive the protection and support they need if they are at risk of abuse. This procedure provides clear direction to staff and volunteers at Adfam if they have concerns that a vulnerable adult is in need of protection.

#### **Different types of abuse**

Please see Appendix 1 which lists the different types of abuse and indicators of abuse.

## Safeguarding Disclosure / Suspicion Action Flow Chart



### **Ways that abuse might be brought to your attention**

- a vulnerable adult might make a direct disclosure about him or herself. They may be aware that they are making a disclosure or they may make reference to something, unaware that this constitutes a disclosure.
- a vulnerable adult might make a direct disclosure about another client. They may be aware that they are making a disclosure or they may make reference to something, unaware that this constitutes a disclosure.
- a client might offer information that is worrying but not a direct disclosure
- a member of staff might be concerned about a vulnerable adult client's appearance or behaviour or about the behaviour of someone else towards the vulnerable adult
- a client may make a disclosure about abuse that a vulnerable adult is suffering or at risk of suffering
- a client might offer information about a vulnerable adult that is worrying but not a direct disclosure

### **Talking to a vulnerable adult who has told you that he/she or someone else is being abused**

If a client makes a disclosure (deliberate or otherwise), it is important that you remain calm, reassuring and supportive, and take certain steps:

- If the client has made a deliberate decision to disclose something, reassure them that telling someone about it was the right thing to do.
- If the client has inadvertently disclosed something (mentioning something which is concerning without realising that it may be concerning or may require steps to protect them/the vulnerable adult in question), explain sensitively but clearly that you are concerned about what they have told you.
- Tell him/her that you now have to do what you can to keep him/her (or the vulnerable adult who is the subject of the allegation) safe.
- Let the client know what you are going to do next and who else needs to know about it (see below).
- Don't try to investigate or quiz them, but make sure that you are clear as to what he/she is saying. If you are clarifying, try to use the precise language that they have used. Whilst you don't investigate, you do let the individual/s tell his or her whole story. Don't shut them down if they continue speaking.
- Keep a mental note of what you are told and, as far as possible, remember the precise language used.
- Ask them what he/she would like to happen as a result of what he/she has said, but don't make or infer promises that this will be able to happen.
- Give the client the Samaritans phone number: 0330 094 5717.
- If the client is worried that they have got someone into trouble, tells you not to tell anyone else or becomes panicky or anxious, remain calm and reassuring. Reassure them that they have not done anything wrong; explain sensitively but clearly that you need to take steps to ensure that they/the subject of the disclosure is safe.
- Ensure that you continue to support the person who has made the disclosure if necessary, or find someone else to support them.



### **Helping a vulnerable adult in immediate danger or in need of emergency medical attention**

- If the vulnerable adult is in immediate danger and is with you, remain with him/her and call the police.
- If the vulnerable adult is elsewhere, contact the police and explain the situation to them.
- If he/she needs emergency medical attention, call an ambulance and, while you are waiting for it to arrive, get help from your first aider.
- If the first aider is not available, use any first aid knowledge that you may have yourself to help the vulnerable adult.
- Contact your supervisor/manager or designated safeguarding officer to let them know what is happening. Conversations should take place in a confidential environment.

The flowchart below shows the steps that you should take if a disclosure is made, or a potential safeguarding concern comes to your attention.

The paragraphs which follow provide further detail on following the flowchart:

#### **In a non-emergency situation**

Listen to the person making the disclosure. Follow the guidelines outlined above for speaking to a client about a safeguarding disclosure

#### **Discuss with Manager / Safeguarding Lead**

If there are colleagues from Adfam or official partner organisations with you or nearby at the time of the disclosure (for example, present at the same event or in the same building), it may be appropriate to discuss the situation with them. Dealing with a safeguarding concern can feel stressful, and sharing the responsibility with a colleague can help. However, it is important to think carefully about who you share the information with. Safeguarding concerns should not be discussed with other clients or family members, volunteers or casual staff where they have not already become aware through the process of disclosure. Informal discussion with colleagues also does not replace compliance with safeguarding procedures, which require you to consult your line manager or a senior manager at Adfam to help you make a decision about whether or not to refer the concern to local authority safeguarding teams. All such conversations should take place in a confidential environment.

Your local authority website may also include threshold documents which can help you to make this decision.

#### **Decision to refer**

If you make the decision that the concern does not warrant a referral to safeguarding teams, this decision must still be fully logged on the client record on the CRM and risk set at the appropriate level (probably 2). Records should be completed at the earliest opportunity and your line manager notified by email.

If you make the decision, in conjunction with your line manager or an Adfam safeguarding lead, that the concern warrants a referral to local authority safeguarding teams, this must be enacted immediately. If possible, inform the Chief Executive of this decision before making the referral. However, if she is not available then this should not delay referral of the concern.

The CRM should be updated at the earliest opportunity.

### **Informing those who have made the disclosure**

Depending on the circumstances, it may be appropriate to inform those involved in the initial disclosure discussion of what steps you are going to take, including clients involved in the disclosure or implicated in the disclosure. The welfare of all vulnerable adults or children involved should be the highest priority. You should also consider what information to share with the vulnerable adult's family or carers, including where some family members may be implicated by the disclosure. If you have involved the police and/or the health services, they should be part of this decision.

Issues that will need to be taken into account are:

- The vulnerable adult's wishes and feelings
- a carer's right to know (unless this would place the vulnerable adult or someone else in danger, or would interfere with a criminal investigation)
- the impact of telling or not telling carers or family members of the vulnerable adult
- the current assessment of the risk to the vulnerable adult and the source of that risk
- any risk management plans that currently exist.

A copy of the reporting form should be signed and dated by all those involved in its completion and kept confidentially on the vulnerable adult's file. The name of the person making the notes should be written alongside each entry.

### **Useful contact details**

Supervisor/manager: (insert name and phone number)

Designated safeguarding officer and deputy: Viv Evans (07889 281076 / [v.evans@adfam.org.uk](mailto:v.evans@adfam.org.uk)) or Kersti Dolphin (07966 186286 / [k.dolphin@adfam.org.uk](mailto:k.dolphin@adfam.org.uk)) or Rebekah Allon-Smith (07753218450 / [r.allon-smith@adfam.org.uk](mailto:r.allon-smith@adfam.org.uk))

Local police: (insert details)

Local authority adult social care department: (insert details)

## **Dealing with allegations of abuse against a vulnerable adult**

This example procedure explains what to do if allegations of abuse are made against a vulnerable adult involved with the organisation.

### **Aims and purpose of procedure**

The aims of this procedure are:

- To ensure that vulnerable adults who attend Adfam services, and any other vulnerable adults who may come to the attention of Adfam are protected and supported following an allegation that they may have been abused by another vulnerable adult involved with Adfam
- To ensure that there is a fair, consistent and robust response to any allegations of this nature so that the risk posed to others by the vulnerable adult in question is managed effectively
- To facilitate an appropriate level of investigation into allegations, whether they relate to recent alleged activity, said to have taken place during the time that the person in question has been involved with Adfam, or whether they relate to abuse which allegedly took place prior to their involvement with Adfam
- To ensure that Adfam continues to fulfil its responsibilities towards vulnerable adults who may be subject to such investigations and are in need of support
- To ensure that there is an appropriate response in situations where allegations are unfounded or deemed to be malicious in origin.

The purpose of the procedure is to provide a clear direction to staff that are called upon to deal with such allegations and to manage investigations and care plans which may result from them.

This procedure applies to:

- any member of staff, volunteer or trustee to whom an allegation of abuse has been made which suggests that another vulnerable adult client or known adult is responsible
- anyone in a managerial position, including the designated safeguarding officer, line managers and supervisors, who may be required to deal with such allegations and manage investigations and care plans that result from them.

Different types of abuse- these definitions are taken from the statutory guidance Working Together 2015 and are shown in Appendix 1.

### **Ways that allegations might be made against another vulnerable adult involved with Adfam:**

- A vulnerable adult might make a direct allegation against another vulnerable adult.
- A vulnerable adult might express discomfort with the behaviour of another vulnerable adult that falls short of a specific allegation.
- Another client, member of staff or volunteer may directly observe behaviour from one client towards another that gives cause for concern.
- The group/organisation may be informed by a parent or by the police or another statutory authority that a vulnerable client is the subject of an investigation.
- A vulnerable adult may volunteer information to the organisation that he/she has harmed someone else or is at risk of doing so, or has committed an offence against or related to a vulnerable adult.

### **Safeguarding Concern of bullying?**

When faced with a situation of one client behaving inappropriately towards another, a decision needs to be made about whether the problem behaviour constitutes bullying or a safeguarding concern. This is a decision that needs to be reached by the designated safeguarding officer, in consultation with the staff member responsible for the relevant project, the staff member's manager/supervisor and, if necessary, the local authority social care department.

If the conclusion is that the behaviour is an example of bullying, and if both vulnerable adults attend the group/organisation, it needs to be dealt with under the anti-bullying policy and procedure.

If it is behaviour that could be described as abuse and has led to the victim possibly suffering significant harm, then it must be dealt with under safeguarding procedures. This should include all incidents of sexual assault and all but the most minor incidents of physical assault.

This checklist can be used to help inform the decision:

#### **Bullying**

- The difference of power between the bully and the person being bullied is relatively small.
- The bullying behaviour may be from a number of adults acting in a group rather than from one acting alone.
- It may also, but not necessarily, be directed towards a group of other vulnerable adults rather than an individual.
- The behaviour involves teasing or making fun of someone, excluding them from activities and conversations, pressurising others not to include someone, spreading hurtful rumours or circulating inappropriate photographs/images/drawings, cyberbullying, shouting at or verbally abusing someone, stealing someone's possessions, making threats, or harassment on the basis of race, gender, sexuality or disability.
- The behaviour has not previously been a concern and the bully or bullies may have been responding to group pressure.
- The behaviour is perceived as bullying by the victim.

Please note: physical or sexual assault, or forcing someone to do something embarrassing, harmful or dangerous is also included in the list of bullying behaviours in this resource library, but are the most likely to constitute a safeguarding concern if the victim is a vulnerable adult and suffers significant harm as a result of the behaviour.

#### **Safeguarding concerns**

- The difference of power between the person who is abusing and the person being abused is significant e.g. there is a significant age difference, there is a significant difference in terms of size or level of cognitive ability, the abuser holds a position of power (such as being a helper, volunteer or informal leader) or the victim is significantly more vulnerable.
- The behaviour involves sexual assault or physical assault (other than the most minor physical assault).
- The person who is the victim of the behaviour may have suffered significant harm.
- The behaviour may not necessarily be perceived by the victim as abusive, particularly if it is sexual in nature.

- The behaviour is not a one-off incident and is part of a pattern of concerning behaviour on the part of the person who is abusing.

### **Adults with limited comprehension?**

All children and young people develop an interest in their own sexuality from a young age, and seek to learn about sex from their peers. Some vulnerable adults, particularly those with cognitive disabilities may act in a way which is inappropriate to their chronological age, but which would be normal for the stage of cognitive or emotional development that they are at. This does not mean that the behaviour is acceptable if it results in abuse of another person, but it highlights the importance of not shaming or scaring individuals, particularly if they may have limited capacity to understand the implications of their behaviour. It is equally important not to allow sexually abusive behaviour perpetrated by a vulnerable adult towards another person to go unchecked, as this is harmful both for the victim and the perpetrator.

There are ways of assessing whether sexual behaviour between vulnerable adults is abusive or not. Indicators of abusive behaviour include:

- there is a significant difference in age, dominance or understanding between the vulnerable adults
- the behaviour was accompanied by the use of threats or bribes
- the behaviour was carried out in secret.

For the purposes of this procedure however, it is enough to say that if there is any question that the behaviour could be abusive, the matter should be discussed with the local authority adult social care department.

This can initially take place without the names of those involved being disclosed, although such information will have to be provided if the view of the social care department or the NSPCC is that the behaviour may constitute significant harm and that an investigation is needed.

### **What to do if you have safeguarding concerns**

Is the person who has been allegedly abused or the person who has allegedly perpetrated the abuse in immediate danger or does either of them need emergency medical attention?

- If either vulnerable adult is in immediate danger and is with you, remain with him/her and call the police if you are unable to remove the danger yourself.
- If the person is elsewhere, contact the police and explain the situation to them.
- If someone needs emergency medical attention, call an ambulance and, while you are waiting for it to arrive, get help from your first aider.
- If the first aider is not available, use any first aid knowledge that you may have yourself to help the individual.
- You also need to contact your supervisor/manager or designated safeguarding officer to let them know what is happening.

A decision will need to be made about whether, when and who should inform the next of kin or carers of both the vulnerable adult who has been abused and the vulnerable adult who has allegedly perpetrated the abuse as well as the local authority social care department. An assessment will need to be made of the capacity of the vulnerable adult to understand and communicate appropriately with carers, family or friends to ensure their support and wellbeing.

If the person who is the alleged victim is not known to Adfam, it is not our role to inform their carer or next of kin. Even if the person who is the alleged victim is known, the police and/or the social care services should be part of the decision making process if they have been contacted.

The paramount consideration should always be the welfare of the vulnerable adults involved. Issues that will need to be taken into account are:

- the vulnerable adults' wishes and feelings
- the right of next of kin or carers to know, if they undertake a role in the person's life which means that they take significant responsibility for that person's wellbeing (unless this would place the vulnerable adult who has allegedly perpetrated the abuse in danger, or would interfere with a criminal investigation)
- the impact of telling or not telling anyone
- the current assessment of the risk to the vulnerable adult who has been abused and the source of that risk
- the current assessment of any risk to the vulnerable adult who has allegedly perpetrated the abuse and the source of that risk
- any risk management plans that currently exist for either individual.

**Once any immediate danger or emergency medical need has been dealt with, the procedure set out below should be followed:**

1. The member of staff who has been informed of the allegation or who has the concern, should make notes of what he/she has been told or of his/her direct concerns using the reporting form, and should discuss these with his/her supervisor/manager within 24 hours. The designated safeguarding officer should also be involved in the discussion.
2. If both vulnerable adults are known to Adfam and if any carers or next of kin do not already know about the allegation or concern, then if this has been deemed appropriate, the member of staff, manager or designated safeguarding officer should discuss it with them unless.  
If there is any uncertainty about whether next of kin or carers should be informed, discussions with them should only take place after this has been agreed with the local authority social care department.
3. If only the vulnerable adult who is alleged to have harmed someone else is known to Adfam then, subject to the considerations set out above, discussions with only this person's next of kin or carers should take place.
4. The person who is the subject of the allegation should also be informed of what has been said about him/her. However, if the view is that social care or the police should be involved, the person should only be informed after discussion and agreement with these agencies. These agencies may have views about what information should be disclosed to the individual at this stage.
5. If there is still uncertainty about whether the allegation or concern constitutes a safeguarding issue, the designated safeguarding officer (or supervisor/manager if DSO not available) should discuss with the social care department without disclosing the identity of either individual.
6. If, having discussed the situation fully and taken advice if necessary, the manager/supervisor and the designated safeguarding person conclude that the alleged behaviour does not constitute a safeguarding issue, then consideration should be given to

whether the anti-bullying policy and procedure should be used (if both vulnerable adults are known to the organisation) and whether either or both vulnerable adults should be referred for other services.

7. If the view is that the behaviour does indeed amount to a safeguarding issue, the designated safeguarding officer should refer both vulnerable adults to the local authority social care department and confirm the referral in writing within 24 hours.
8. Pending the outcome of the referral to the social care department and the possible investigation or assessment that may follow from this, any risk that may be posed to other vulnerable adults who have allegedly harmed someone else will need to be carefully managed. This should be done on an inter-agency basis in accordance with procedures developed by the local safeguarding board for vulnerable adults who display harmful behaviour towards others.
9. The designated safeguarding officer should enquire of the adult social care department whether these procedures are being used and, if so, should ask to be involved in or at least kept informed of inter-agency decisions made in accordance with these procedures.
10. If the procedures are not being used but Adfam remains concerned that the person could pose a risk to others, then the designated safeguarding person and the manager should consider whether the person can continue to be involved with Adfam and, if so, on what basis. This is a situation that needs to be kept under regular review as the investigation and assessment conducted by the statutory agencies is carried out and reaches a conclusion. It may also need to be reviewed regularly following the conclusion of the assessment process, as the individual may be receiving support that should, with time, reduce the level of risk he/she presents.
11. If the allegation is found to be without substance or fabricated, Adfam will consider referring the individual who was said to have been harmed to the children's social care department for them to assess whether he/she is in need of services (for example, they may have been abused by someone else).
12. If it is felt that there has been malicious intent behind the allegation, Adfam will discuss with the police whether there are grounds to pursue any action against the person responsible.
13. Adfam Board members will be informed within 24 hours where such an allegation has been made.

What should I say to a vulnerable adult who says that he/she or another person is being abused by another vulnerable adult?

- If the vulnerable adult has made a deliberate decision to disclose something, reassure them that telling someone about it was the right thing to do.
- If the vulnerable adult has inadvertently disclosed something (mentioning something which is concerning without realising that it may be concerning or may require steps to protect them/the person in question), gently explain that you are concerned about what they have told you.
- Tell him/her that you now have to do what you can to keep him/her (or the person who is the subject of the allegation) safe.
- Let the person know what you are going to do next and who else needs to know about it (see below).
- Don't try to investigate or quiz the person, but make sure that you are clear as to what he/she is saying. If you are clarifying, try to use the precise language that the person has

used. Whilst you don't investigate, you do let the person tell his or her whole story. Don't shut them down if they continue speaking.

- Keep a mental note of what the person is saying and, as far as possible, remember the precise language used.
- If possible and appropriate, explain to the vulnerable adult's next of kin or carer what has happened, or accompany the person to do this themselves.
- Ask the person what he/she would like to happen as a result of what he/she has said, but don't make or infer promises that this will be able to happen.
- Give the person the Samaritans phone number: 0330 094 5717
- If the vulnerable adult is worried that they have got someone into trouble, tells you not to tell anyone else or becomes panicky, remain calm and reassuring. Reassure them that they have not done anything wrong; gently explain that you need to talk it over with others to ensure that they/others can be kept safe.
- Ensure that you continue to support the person or find someone else to support them if they are upset or anxious about the conversation.
- Where necessary, make sure that the carer/next of kin has support too.

What should I say to a vulnerable adult who says that he/she has abused another vulnerable adult?

- Reassure the individual that he/she has done the right thing by telling someone about it.
- Tell him/her that you now have to do what you can to keep him/her and the person who has been abused safe.
- Let the person know what you are going to do next and who else needs to know about it.
- Let the vulnerable adult tell his/her whole story. Don't try to investigate or quiz them, but make sure that you are clear as to what he/she is saying.
- If there is no risk to the vulnerable adult from a next of kin, carer or family member then explain to the parent/carers what has happened or encourage the vulnerable adult to do so.
- Check out what the vulnerable adult expects to happen as a result of what he/she has said. Offer reassurance where appropriate but don't make or infer promises you can't keep.
- Reassure the vulnerable adult that, with help, the problem can be sorted out and that what has happened does not define them. Be cautious in using the term 'abuser' or any other labelling language. Language which equates the behaviour with them as a person or their identity can be shaming, which is counter-productive.
- Give the person the Samaritans phone number.
- Remember that the vulnerable adult who has behaved in this way is a person in need of support.
- Make sure that any next of kin or carer has support too.

### **Recording the concerns**

Use the reporting form to record the concern and how it is dealt with. The relevant sections of the form should be completed and signed at each stage of the procedure. It can be used to forward information to the statutory safeguarding authorities if a referral to them is needed.

### **Useful contact details**

Supervisor/manager: name and phone number (insert details)



Designated safeguarding officer and deputy:

Viv Evans: 07889 281076 / [v.evans@adfam.org.uk](mailto:v.evans@adfam.org.uk) or  
Kersti Dolphin 07966 186286 / [k.dolphin@adfam.org.uk](mailto:k.dolphin@adfam.org.uk)  
Rebekah Allon-Smith 07753218450 / [r.allon-smith@adfam.org.uk](mailto:r.allon-smith@adfam.org.uk)

Local police (insert details)

Local authority adult social care department (insert details)

Samaritans: 0330 094 5717

## **Role of the designated safeguarding officer**

1. Adfam has a dedicated person to take responsibility for Safeguarding. This role is referred to in all policies and documentation as the Safeguarding Lead.
2. Their role is to:
  - Ensure the organisation's Safeguarding policies and procedures are followed.
  - Ensure they know how to make contact with social services and police staff responsible for dealing with safeguarding concerns both during and after office hours.
  - Report any concerns to social services or the police. (N.B. Urgent concerns should be reported immediately by those aware of them even if the designated person is not available.)
  - Act as a source of advice on all Safeguarding matters and seek further advice and guidance from local statutory agencies as needed.
  - Ensure that a record is kept of any concerns about a child or adult and of any conversation or referrals to statutory agencies.
3. The Safeguarding Lead for Adfam is Vivienne Evans, Chief Executive. The Trustee currently nominated as responsible for Safeguarding is James Armstrong.

## **Managing allegations against staff and volunteers**

This procedure outlines what you should do if an allegation of abuse is made against an adult working for or involved with Adfam.

The procedure should provide a clear direction to staff and trustees who are called upon to deal with such allegations and to manage investigations that may result from them.

The aims of this procedure are:

- to ensure that vulnerable adults who attend Adfam, and any other vulnerable adults who may come to our attention, are protected and supported following an allegation that they may have been abused by an adult from within Adfam
- to ensure that there is a fair, consistent and robust response to any allegations made, so that the risk posed to other vulnerable adults or children by an abusive individual is managed effectively
- to facilitate an appropriate level of investigation into allegations, whether they are said to have taken place recently, at any time the person in question has been employed by/volunteered with Adfam, or prior to the person's involvement with Adfam
- to ensure that Adfam continues to fulfil its responsibilities towards members of staff, volunteers or trustees who may be subject to such investigations
- to ensure that individuals are able to continue in their role if they have been at the centre of allegations that are unfounded or deemed to be malicious in origin.

This procedure applies to:

- any member of staff, volunteer or trustee to whom an allegation of abuse has been made, that involves another member of staff, volunteer or trustee
- anyone in a managerial position (including the designated safeguarding officer children, line managers, supervisors and trustees) who may be required to deal with such allegations and manage investigations that result from them.

### **What to do if an allegation is made or information is received**

There are potentially two issues that need to be dealt with as a matter of urgency:

1. Is a vulnerable adult in immediate danger or does she/he need emergency medical attention?
  - If a vulnerable adult is in immediate danger and is with you, remain with him/her and call the police.
  - If the vulnerable adult is elsewhere, contact the police and explain the situation to them.
  - If the vulnerable adult needs emergency medical attention, call an ambulance and, while you are waiting for it to arrive, get help from your first aider.
  - If the first aider is not available, use any first aid knowledge that you may have yourself to help the vulnerable adult. You also need to contact your supervisor/manager or named person for safeguarding to let them know what is happening.

The member of staff or manager should also inform the carer, family or next of kin of the vulnerable adult if the vulnerable adult is in need of emergency medical attention, and arrange to meet them at the hospital or medical centre. The carer/family should be informed that an incident has occurred, that the vulnerable adult has been injured and that immediate steps have been taken to get help.

### **Is the person at the centre of the allegation working with vulnerable adults or children now?**

If this is the case, the concern needs to be discussed immediately with the manager of the group/organisation, your line manager, and/or the designated safeguarding officer. One of these (either a manager or designated safeguarding officer) should then, in a sensitive manner, remove the staff member involved in the allegation from direct contact with vulnerable adults or children.

It should then be explained to the person, in private, that there has been a complaint made against him/her, although the details of the complaint should not be given at this stage. The person should be informed that further information will be provided as soon as possible but that, until consultation has taken place with the relevant agencies and within the organisation, they should not be working with vulnerable adults or children. It may be best, under the circumstances, for the person to return home on the understanding that the manager or designated safeguarding officer will telephone him/her later in the day.

The information provided to him/her at this stage will need to be very limited. This is because discussions need to take place first with other agencies who may need to be involved, such as the local authority social care department or the police.

If the person is a member of a trade union or a professional organisation, he/she should be advised to make contact with that body. Arrangements should also be made for the member of staff or volunteer to receive ongoing support in line with the responsibilities the organisation has towards his or her welfare. Responsibility for ongoing welfare of the individual should be given to a senior member of staff or manager who will not be called on to investigate the allegations as part of disciplinary procedures. As explained below, and in the [name of] associated policies, a manager will be asked to conduct an investigation. The member of staff under investigation will also have right of appeal about the outcome of any such investigation. In the event of an appeal, the case will be escalated to a more senior member of staff or trustee. The necessity for a neutral, previously uninvolved individual to hear an appeal must be borne in mind when allocating a member of staff to provide ongoing support, and when allocating an initial investigative officer.

### **Conducting an investigation**

Once any urgent necessary steps have been taken, attention can be given to dealing with the full implications of the allegations.

There are up to three possible lines of enquiry when an allegation is made:

- a police investigation of a possible criminal offence
- enquiries and an assessment by the local authority adult social care department about whether a vulnerable adult is in need of protection
- investigation by an employer and possible disciplinary action being taken against the person in question. This includes implementing a plan to manage any risk posed by the individual to vulnerable adults, children and young people in the workplace until the outcome of the other investigations and enquiries is known. If the individual is a

volunteer, then they will be subject to the disciplinary procedure for volunteers. The organisation will need to consider whether the person can continue in their role and, if so, what steps should be taken to manage any risk that they may pose. They may be subject to an improvement notice if appropriate. Any risk assessment documentation should be immediately updated to reflect any changes.

### **Reporting an allegation or concern**

If the allegation is made by a client to a member of staff or if a member of staff observes concerning behaviour by a colleague at first hand, this should be reported immediately to the staff member's supervisor/manager and the designated safeguarding officer; Adfam's lead on handling the allegation.

Members of the Adfam Board should also be informed within 24 hours, and designated trustees will be involved, where necessary, in determining the appropriate course of action, especially in cases where there is a potential criminal investigation.

If a staff member has received an allegation or observed something of concern about their own manager, the staff member should report the allegation or concern to the person more senior to their manager.

If the person who is the subject of the concern is a designated safeguarding officer, the matter should be reported to the member of the Board responsible for safeguarding (David Mackintosh).

Issues that will need to be taken into account are:

- the vulnerable adult's wishes and feelings
- a carer's right to know (unless this would place the vulnerable adult or someone else in danger or would interfere with a criminal investigation)
- the impact of telling or not telling the carer/family of the vulnerable adult
- the current assessment of the risk to the vulnerable adult and the source of that risk
- any risk management plans that currently exist.

Once any immediate danger or emergency medical need has been dealt with, follow the steps set out in the flowchart at the end of this document.

### **When to involve the local authority designated officer or team (formerly known as the LADO)**

The organisation's designated safeguarding officer should report the allegation to their internal senior lead for safeguarding and to the local authority designated officer or team (formerly known as the LADO) within one working day if the alleged behaviour suggests that the person in question:

- may have behaved in a way that has harmed or may have harmed a vulnerable adult
- has possibly committed a criminal offence against or related to a vulnerable adult
- has behaved towards a vulnerable adult in a way that suggests that he/she may be unsuitable to work with vulnerable adults or children.

This should also happen if the individual has volunteered the information him/herself.

The local authority designated officer or team may be told of the allegation from another source. If this is the case, then the first information received by Adfam may be when the local authority makes contact in order to explain the situation.

Whoever initiates the contact, there will be discussion between the local authority designated officer or team and Adfam's designated officer, to share information about the nature and circumstances of the allegation, and to consider whether there is any evidence to suggest that it may be false or unfounded.

If there is any reason to suspect that a vulnerable adult has suffered, or be likely to suffer, significant harm and there are no obvious indications that the allegation is false, the local authority designated officer or team, in cooperation with Adfam, will initiate a strategy discussion within the local authority adult social care department.

The local authority designated officer or team and the organisation's designated safeguarding officer will take part in the strategy discussion. The designated safeguarding officer and any other representative from Adfam should cooperate fully with this and any subsequent discussion with the social care department.

It should be asked from the outset that the adult social care department shares any information obtained during the course of their enquiries with Adfam if it has any relevance to the person's employment.

### **Dealing with a criminal offence**

If there is reason to suspect that a criminal offence may have been committed (whether or not the threshold of 'significant harm' is reached), the local authority designated officer or team will contact the police and involve them in a similar strategy discussion, which will include the organisation's designated safeguarding officer.

The designated safeguarding officer and any other representative from Adfam should cooperate fully with any discussion involving the police and should ask for similar cooperation from the police in terms of the sharing of information relevant to the person's employment.

Discussions with the police should also explore whether there are matters that can be acted on in a disciplinary process while the criminal investigation takes place, or whether disciplinary action must wait until the criminal process is completed.

### **Talking to carers and family about the allegation or concern**

If the vulnerable adults carers/family do not already know about the allegation, the designated safeguarding officer and the local authority designated officer or team need to discuss whether they should be informed, how and by whom.

### **Talking to the person who is the subject of the allegation**

The person at the centre of the allegation should be informed as soon as possible after the initial consultation with the local authority designated officer or team. However, if a strategy discussion within the local authority social care team or the police is needed, this might have to take place before the person concerned can be spoken to in full. The police and adult social care department may have views on what information can be disclosed to the person.

Only limited information should be given to the person in question, unless the investigating authorities have indicated that they are happy for all information to be disclosed or unless there is no need for involvement from these statutory agencies.

The designated safeguarding officer will need to keep in close communication with the local authority designated officer or team and the other agencies involved in order to manage the disclosure of information appropriately.

### **Taking disciplinary action**

If the initial allegation does not involve a possible criminal offence, the designated safeguarding officer for and manager of the person at the centre of the allegation should still consider whether formal disciplinary action is needed.

If the local authority social care department has undertaken any enquiries to determine whether a vulnerable adult is in need of protection, the designated safeguarding officer should take account of any relevant information from these enquiries when considering whether disciplinary action should be brought against the person at the centre of the allegations.

The following timings should be kept to wherever possible, depending on the nature of the investigation:

- If formal disciplinary action is not needed, other appropriate action should be taken within three working days.
- If disciplinary action is required, and can be progressed without further investigation, this should take place within 15 days.
- If Adfam decides that further investigation is needed in order to make a decision about formal disciplinary action, the designated safeguarding officer should discuss with the local authority designated officer or team the possibility of this investigation being done by an independent person to ensure that the process is objective. Whether or not the investigation is handled internally or independently, the report should be presented to the designated safeguarding officer within 10 working days.
- Having received the report of the disciplinary investigation, the designated safeguarding officer should decide within two working days whether a disciplinary hearing is needed.
- If a hearing is needed, it should be held within 15 working days.
- The designated safeguarding officer should continue to liaise with the local authority designated officer or team during the course of any investigation or disciplinary proceedings, and should continue to use the local authority designated officer or team as a source of advice and support.

If a criminal investigation is required, it may not have been possible to make decisions about initiating disciplinary proceedings or about the person's future work arrangements until this is concluded. The police are required to complete their work as soon as reasonably possible and to set review dates, so the designated safeguarding officer should either liaise with the police directly or via the local authority designated officer or team to check on the progress of the investigation and criminal process.

The police are also required to inform the employer straight away if the person is either convicted of an offence or acquitted or, alternatively, if a decision is made not to charge him/her with an

offence or to administer a caution. In any eventuality, once the outcome is known, the designated safeguarding officer should contact the local authority designated officer or team to discuss the issue of disciplinary proceedings.

If the allegation is substantiated and if, once the case is concluded, Adfam dismisses the person or ceases to use their services, or the person ceases to provide his/her services, the designated safeguarding officer should consult with the local authority designated officer or team about referral of the incident to the Disclosure and Barring Service (DBS). This should take place within a month.

### **Keeping a record of the investigation**

All those involved in dealing with the allegation should keep clear notes of the allegations made, how they were followed up, and any actions and decisions taken, together with the reasons for these.

These notes should be compiled gradually as the situation unfolds, with each entry being made as soon as possible after the event it describes. The notes should be signed and dated by the person making them, and the person's name should be printed alongside.

The notes should be kept confidentially on the file of the person who is the subject of the allegation. Discussion should take place with the local authority designated officer or team to determine whether any aspects of the notes may not be shared with the person concerned. If there are no reasons not to do so, a copy of the records should be given to the individual.

The notes should be held on file for a 10-year period, whether or not the person remains with Adfam for this period. During the period of the Independent Inquiry into Child Sexual Abuse (IICSA), chaired by the Hon Dame Lowell Goddard DNZM, it is advisable to keep such notes indefinitely.

### **Useful contact details**

Supervisor/manager: name and phone number (insert details)

Designated safeguarding officer for and deputy:

Viv Evans: 07889 281076 / [v.evans@adfam.org.uk](mailto:v.evans@adfam.org.uk)

Kersti Dolphin: 07966 186286 / [k.dolphin@adfam.org.uk](mailto:k.dolphin@adfam.org.uk)

Rebekah Allon-Smith 07753218450 / [r.allon](mailto:r.allon)

[smith.adfam.org.uk](mailto:smith.adfam.org.uk)

Local police (insert details)

Local authority adult social care department (insert details)

Local authority designated officer or team (formerly LADO) (insert details)



**First aid ratios**

At least one adult present should be trained in first aid.

If Adfam is using an external provider to run events, a risk assessment will still be conducted; Adfam will request the provider's risk assessment where appropriate and will request assurance that staff running the activities are DBS checked. If a provider does not provide these assurances prior to the event, the event will not take place.

## Code of conduct for staff and volunteers

### Code of Conduct for working with vulnerable adults

We will endeavour to make this organisation a safe and caring place for children to be by having a code of conduct for staff and volunteers. This will be given to all staff and volunteers at induction and they will be expected to comply with it. Non-compliance with the code will result in corrective measures by management or, where necessary, disciplinary procedures.

Many organisations will have professional ethics that they will work to. For organisations where there are no professional guidelines available, the code of conduct ensures that workers and volunteers are clear about how they should conduct themselves when working with children and young people. This code of conduct is principally designed to safeguard children and young people involved in any activity, but will help you by identifying required standards of behaviour as you carry out your role as a worker or volunteer. Following this code of conduct will reduce the likelihood of any misinterpretations of your actions. It is key for you to remember that you have been allocated a position of trust and responsibility and you must act in accordance with this.

**DO** treat all of those involved equally with respect and dignity – offensive, discriminatory or aggressive behaviour will not be tolerated.

**DO** understand your role in any policies and procedures e.g. safeguarding, health and safety – be clear about what you should do if a concern about the safety or welfare of a vulnerable adult arises.

**DO** co-operate fully with other volunteers and professionals.

**DO** consistently display high standards of behaviour and appearance.

**DO** show respect for your peers and participants, and treat them the way you would want to be treated yourself.

**DO** understand that inappropriate behaviour will be followed up by the Designated Safeguarding Lead in consultation with the Local Authority Designated Officer if appropriate

**DO** act as a role model for clients and participants. Your behaviour may influence others

**DO** ensure that permission is sought from participants for any photographs or video, and that the relevant policies are complied with.

**DO** remember that your behaviour towards participants to whom you are in a position of trust should reflect your role. Sexual or inappropriate exclusive relationships with anyone in your care or with whom you have a professional relationship will be treated as an abuse of trust and dealt with through the disciplinary procedures. Any such relationship **MUST** be disclosed to a line manager at the earliest opportunity.

**DO** be vigilant of changes in behaviour and inappropriate conduct in other workers and volunteers and report to your Designated Safeguarding Lead.

**DO** remember that you are a professional and maintain professional boundaries with all individuals that you work with

**DO** use Adfam technology and equipment only for work purposes and in line with IT and data storage policies and procedures

**DO** risk assess any use of social media

There are a number of things that you must ensure do not happen whilst you are working or volunteering in this organisation

**Never** take clients to your home.

**Never** allow or engage in any form of inappropriate touching or physical abuse.

**Do not** take part in or tolerate behaviour that frightens, embarrasses or demoralises any individual.

**Never** make sexually suggestive comments to a client, even in fun.

**Do not** allow allegations made by a vulnerable adult to go unchallenged, unrecorded or ignored.

**Do not** do things of a personal nature for vulnerable adults that they can do for themselves.

**Do not** contact clients individually via Facebook or any other social media unless this is the recognised and agreed form of professional contact and you are utilising an Adfam account. Do not contact clients using your personal social media accounts.

**Do not** make promises that you cannot keep. All allegations or disclosures on safeguarding issues must be reported on.

**Avoid** favouritism and special friendships.

**Do not** take pictures of clients using personal equipment.

**Do not** transport clients in your own vehicle except in exceptional circumstances and with the clearance of a manager. In such an instance make all efforts to avoid being the only member of staff in the vehicle and ensure appropriate safeguards are in place.

This code of conduct protects those we work with, you as a worker or volunteer and the organisation, by reducing the risk of anyone working with us, using their role to access vulnerable people to cause harm. It also helps to identify practice that could be misinterpreted and may lead to a false allegation being made.

Any breach of the code of conduct may lead to disciplinary action being taken. Serious breaches may result in a referral to Police, Social Services or the Local Authority Designated Officer, and to immediate dismissal.

All workers or volunteers are expected to report any breach to the Designated Safeguarding Lead. Please complete the section below to confirm that you agree to adhere to the Code of Conduct:

Name:

Role:

Date:

I have read the Code of Conduct and agree to follow the guidelines, and act accordingly. I understand the consequences if I break any of the guidelines.

Signature:

Date:

## **Anti-bullying policy and procedures**

The legal context for this policy and procedure is:

- The Childrens Acts 1989 and 2004
- The Protection from Harassment Act 1997
- The Human Rights Act 2000
- The Equality Act 2010
- Government guidance: Working Together to Safeguard Children 2015
- Government guidance on bullying 2015

It should be read alongside our policies and procedures on:

- Dealing with disclosures and concerns about a child or young person
- Managing allegations against staff and volunteers
- Recording and information sharing
- Code of conduct for staff and volunteers
- Safer recruitment
- E-safety
- Complaints
- Equality and diversity

We recognise that:

- There is no legal definition of bullying. However it is usually defined as behaviour that is:
  - Repeated
  - Intended to hurt someone either physically or emotionally
  - Often aimed at certain groups, e.g. because of race, religion, gender or sexual orientation (<https://www.gov.uk/bullying-at-school/bullying-a-definition>)
- One person or a group can bully others;
- Bullying can occur either face to face between individuals or groups or online, using information technology, such as computers or mobile phones;

**Bullying can include:**

- verbal teasing or making fun of someone;
- excluding others

- pressurising others not to be friends with the person who is being bullied;
- spreading hurtful rumours or passing round inappropriate photographs/images/drawings;
- shouting at or verbally abusing someone;
- stealing or damaging someone's belongings;
- making threats;
- forcing someone to do something embarrassing, harmful or dangerous;
- harassment on the basis of race, gender, sexuality or disability;
- physical or sexual assault (although all sexual incidents and all but very minor physical incidents constitute abuse and must be dealt with in accordance with safeguarding procedures).
- bullying causes real distress. It can affect a person's health and development and, at the extreme, can cause significant harm;
- people are often targeted by bullies because they appear different from others;
- we all have a role to play in preventing bullying and putting a stop to bullying.

**The purpose of this policy is:**

- to prevent bullying from happening in our organisation as much as possible;
- when bullying does happen, to make sure it is stopped as soon as possible and that those involved receive the support they need;
- to provide information to all staff, volunteers, and clients where relevant, about what we should all do to prevent and deal with bullying.

**We will seek to prevent bullying by:**

1. Implementing a code of behaviour that sets out the 'dos' and 'don'ts' of how everyone involved in Adfam is expected to behave, both in face-to-face contact and online;
2. Having behaviour agreements for group work which consider:
  - a) Group members' responsibilities to look after one another and uphold the behaviour code;
  - b) Practising skills such as listening to each other;
  - c) Respecting the fact that we are all different;
  - d) Making sure that no one is excluded
  - e) Dealing with problems in a positive way
  - f) Checking that the anti-bullying measures are working well
3. Having a complaints policy and procedure;
4. Making sure that staff, volunteers, clients and other relevant people have clear information about our anti-bullying policy, complaints procedure, code of behaviour and anti-bullying procedure

When bullying occurs, we will respond to it by:

1. Following our anti-bullying procedure;
2. Providing support and training for all staff and volunteers on dealing with all forms of bullying including racial, sexist, homophobic and sexual bullying;
3. Addressing the issue from the point of view of the person being bullied, the bully, any bystanders and Adfam as a whole;
4. Review the plan developed to address the bullying, in order to ensure that the problem has been resolved;
5. Avoiding any punishments that make the individuals concerned seem small, or look or feel foolish in front of others

### **Monitoring and review**

Vivienne Evans, Chief Executive, is responsible for monitoring the effectiveness of this policy. This policy will be reviewed every two years. The next review is due in May 2025

## **Adfam's anti-bullying procedure**

### **Purpose and aim of this procedure**

This procedure is supported by the Adfam anti-bullying policy. Its aim is to provide detailed guidance to staff and volunteers, as well as to clients who may experience bullying, so that they will know what to do if an incident of bullying occurs between clients.

The procedure also aims to ensure that Adfam responds fairly and consistently to incidents of bullying, recognising that those who bully often have needs too.

This procedure applies to all clients who attend Adfam services who may be bullied, behave in a bullying way towards others or observe someone being bullied.

It also applies to all staff and volunteers who observe bullying between clients within Adfam, who may have incidents of bullying reported to them or who may be concerned that a client at an Adfam service is being bullied.

If a client is bullying another client who is a vulnerable adult to the extent that it may cause significant harm, then it will need to be dealt with under safeguarding procedures.

This procedure does not cover incidents of bullying among staff members and volunteers. The grievance procedure should be used for this purpose.

### **Forms bullying might take**

The most recent Government guidance on bullying makes it clear that there is no legal definition of bullying. However, it's usually defined as behaviour that is:

- repeated
- intended to hurt someone either physically or emotionally
- often aimed at certain groups, eg because of race, religion, gender or sexual orientation

<https://www.bullying.co.uk/general-advice/>

It can include:

- verbal teasing or making fun of someone
- excluding people
- pressurising others not to be friends with the person who is being bullied
- spreading hurtful rumours or passing around inappropriate photographs/images/drawings
- cyberbullying (i.e. using computers or mobile phones to bully someone)
- shouting at or verbally abusing someone
- stealing or damaging someone's possessions
- making threats
- forcing someone to do something embarrassing, harmful or dangerous
- harassment on the basis of race, gender, sexuality or disability
- physical or sexual assault

People are often bullied because they appear different from others.

### **The signs and symptoms of bullying**

If someone is being bullied, they might not tell anyone directly. This could be because they have been threatened and are afraid to say anything or because they believe that nothing can be done about it and that telling someone will only make it worse. It could even be because they don't recognise that what is happening to them is bullying.

Signs that someone may be being bullied could include:

- being unhappy, withdrawn and unwilling to spend time in a group, especially during unstructured periods e.g. break time
- being without friends
- missing meetings and activities at Adfam and/or expressing a reluctance to attend
- being clingy with adults
- appearing to lose possessions or money (things that may have really been stolen by or given away to bullies)
- unexplained injuries
- uncharacteristic illness or aggression.

Some of these signs might also indicate abuse at the hands of adults or other negative experiences, so they should be treated with caution.

This procedure should be reviewed every two years

Date of last review: May 2023

Date of next review: May 2025

The person responsible for reviewing it is: Vivienne Evans, Chief Executive



## **Online safety policy and procedures for responding to concerns about online abuse**

### **Our e-safety policy**

This policy should be read alongside Adfam's policies and procedures on Whistleblowing; Disciplinary action; Complaints; Anti-bullying; Recording and information sharing; Training, supervision and support; and the overarching Child Protection/Safeguarding Policy and Procedures.

The policy and the procedures that it underpins apply to all staff, including senior managers and the board of trustees, paid staff, volunteers and sessional workers, agency staff, students and anyone working on behalf of Adfam.

### **Purpose of policy**

- to protect clients who receive Adfam services and who make use of information technology (such as mobile phones/devices, games consoles and the internet) as part of their involvement with us;
- to provide staff and volunteers with the overarching principles that guide our approach to e-safety;
- to ensure that, as an organisation, we operate in line with our values and within the law in terms of how we use information technology and behave online.

We recognise that:

- the welfare of clients who come into contact with our services is paramount and should govern our approach to the use and management of electronic communications technologies and online behaviour;
- all vulnerable adults, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity, have the right to equal protection from all types of harm or abuse;
- use of information technology is an essential part of all our lives; it is involved in how we as an organisation gather and store information, as well as how we communicate with each other. It is also an intrinsic part of the experience of our clients, and is greatly beneficial to all. However, it can present challenges in terms of how we use it responsibly and, if misused either by an adult or a young person, can be actually or potentially harmful to them.

### **We will seek to keep vulnerable adults safe by:**

- appointing an e-safety coordinator (note: this may or may not be the same person as your designated safeguarding officer for children)
- developing a range of procedures that provide clear and specific directions to staff and volunteers on how to behave online and the appropriate use of ICT;
- supporting and encouraging vulnerable adults using our services to use the opportunities offered by mobile phone technology and the internet in a way that keeps themselves safe and shows respect for others;
- incorporating statements about safe and appropriate ICT use and online behaviour into the codes of conduct both for staff and volunteers and for clients where relevant;
- use our procedures to deal firmly, fairly and decisively with any examples of inappropriate ICT use and online behaviour, complaints or allegations, whether by an adult or a child/young person (these may include breaches of filtering, illegal use, downloading or creating indecent images of children, cyberbullying, or use of ICT to groom a child or to

perpetrate abuse);

- reviewing and updating the security of our information systems regularly;
- providing adequate physical security for ICT equipment;
- ensuring that user names, logins and passwords are used effectively;
- using only official email accounts provided via the organisation, and monitoring these as necessary;
- ensuring that the personal information of staff, volunteers and service users (including service users' full names) are not published on our website, and no form of identifying information is published without full written permission;
- ensuring that images of children, young people and families are used only after their written permission has been obtained, and only for the purpose for which consent has been given;

- risk assessing in advance any social media tools used in the course of our work with families; this assessment to be carried out by the member of staff wishing to use them;
- providing effective management for staff and volunteers on ICT issues and online behaviour, through supervision, support and training;
- examining and risk assessing any emerging new technologies before they are used within the organisation.

The name of our e-safety coordinator is Vivienne Evans

He/she can be contacted on [v.evans@adfam.org.uk](mailto:v.evans@adfam.org.uk) / 07889281076

We are committed to reviewing our policy, procedures and good practice every 2 years.

This policy was last reviewed in June 2024

## **Records retention and storage policy**

If an organisation needs to hold records about a child or adult for any reason, it must have policies and procedures in place regarding the retention and storage of that information.

As well as this, as part of its safeguarding policy and procedures, every organisation must have clear guidelines for the retention, storage and destruction of child protection records. These are records which relate to concerns about a child's welfare and safety, and/or concerns about possible risks posed by people working or volunteering with children. This information can be found in the Child Safeguarding Policy.

### **Guiding principles of records management**

According to Data Protection principals, records containing personal information should be:

- adequate, relevant and not excessive for the purpose(s) for which they are held;
- accurate and up to date; and
- only kept for as long as is necessary  
(Information Commissioner's Office, 2017(a) and 2017(b)).

The introduction of the General Data Protection Regulation (GDPR) in 2018 does not change the way child protection records should be stored and retained.

Your organisation must:

- know the reason why you're keeping records about children and/or adults (for example, because they relate to child protection concerns);
- assess how long you need to keep the records for; and
- have a plan for how and when the records will be destroyed.

To keep personal information secure, you should:

- compile and label files carefully, avoiding identifying client details unless files are stored in an encrypted location;
- keep files containing sensitive or confidential data secure and encrypted and allow access on a 'need to know' basis only;
- keep a log so you can see who has accessed the confidential files, when, and the titles of the files they have used.
- Email sensitive information only when there is no other option, and always ensure that it is encrypted. Do not send personal details in the body of an email. Delete the email you have sent, or attachments from it, at the earliest opportunity.
- When transferring data, use encrypted USB sticks, or if transferring immediately from one location to another, immediately delete the data from the transfer device.

If you are creating records about the children and/or adults that take part in your services or activities, you need to make sure they understand what records you hold, why you need to hold them and who you might share their information with (for example as part of a multi-agency child protection team) (Information Commissioner's Office, 2017(a) and 2017(b)). If you are keeping records for child protection reasons, you don't necessarily need to get consent from the adults and/or children concerned.

## **Recording concerns about adult behaviour**

Sometimes concerns might be raised about an adult who works or volunteers with children. This could be because they've:

- behaved in a way that has harmed, or may have harmed, a child;
- committed a criminal offence against, or related to, a child; or
- behaved in a way that indicates they are unsuitable to work with young people.

You must keep clear and comprehensive records of all allegations made against adults working or volunteering with children, including;

- what the allegations were;
- how the allegations were followed up;
- how things were resolved;
- any action taken; and
- decisions reached about the person's suitability to work with children.

Keeping these records will enable you to give accurate information if you are ever asked for it. For example:

- in response to future requests for a reference;
- if a future employer asks for clarification about information disclosed as part of a vetting and barring check; or
- if allegations resurface after a period of time.

## **Storing records relating to adults**

Records relating to concerns about an adult's behaviour should be kept in the person's confidential personnel file (not in a central 'concerns log') and a copy should be given to the individual.

## **Retention periods: concerns about adults**

If concerns have been raised about an adult's behaviour around children, you should keep the records in their HR file until they reach retirement or for 10 years - whichever is longer (IRMS, 2016).

You should keep records for the same amount of time regardless of whether the allegations were unfounded. However if you find that allegations are malicious you should destroy the record immediately.

Information should be kept for this length of time even if the person stops working or volunteering for the organisation.

## **Exceptions**

In some cases, records can be kept for longer periods of time. For example, if:

- the records provide information about a child's personal history, which they might want to access at a later date;
- the records have been maintained for the purposes of research;
- the information in the records is relevant to legal action that has been started but not finished; or

- the records have been archived for historical purposes (for example if the records are relevant to legal proceedings involving the organisation).

Where there are legal proceedings it is best to seek legal advice about how long to retain your records.

Some records are subject to statutory requirements and have a specific retention period. This includes records relating to:

- children who have been 'looked after' by the local authority;
- adopted children;
- registered foster carers;
- residential children's homes.

You should check the legislation to see which rules apply to your organisation. Links to the legislation in each of the UK nations is available below.

You should also check whether your insurance company, local safeguarding children board (LSCB) or regulating body make any stipulations about retention periods.

When records are being kept for longer than the recommended period, files must be clearly marked with the reasons for the extension period.

Organisations must keep any records that could be needed by an official inquiry (for example the Independent Inquiry into Child Sexual Abuse (IICSA, 2017). Inquiries will issue directions for records to be retained and these must be followed.

### **Disclosure and barring checks**

You shouldn't store copies of disclosure and barring check certificates unless there is a dispute about the results of the check. Instead, a confidential record should be kept of:

- the date the check was completed;
- the level and type of check (standard/enhanced/barred list check and the relevant workforce);
- the reference number of the certificate; and
- the decision made about whether the person was employed (with reasons).

If there is a dispute about the results of a check, you may keep a copy of the certificate for not longer than 6 months.

## Summary: key points to consider

You must consider the following questions when developing or reviewing your child protection records retention and storage policy:

- Is our record-keeping in line with data protection principles?
- What records will we retain and for what purpose?
- How will the records be stored and who will have access to them?
- How long should we retain records for?
- Do we need to follow any statutory requirements about the retention of our records?
- What arrangements do we need to review records?
- What arrangements do we need to destroy them?
- Does our insurer stipulate anything about record retention periods?
- Does our regulatory/inspection body (if applicable) set out any minimum expectations about record keeping, retention and destruction?
- Does our local safeguarding children board (LSCB) provide guidance on record retention and destruction that we are expected to follow?

## Further information

NCVO provides further guidance on data protection for the voluntary sector:

<https://www.ncvo.org.uk/practical-support/information/data-protection>

Key legislation affecting the retention and storage of child protection records includes:

UK:

The General Data Protection Regulation (GDPR) will come into force on 25 May 2018. The Information Commissioner's Office provides a [guide to the GDPR](#) to help organisations comply with its requirements (Information Commissioner's Office, 2017b).

England:

[Data Protection Act 1998](#)

## References

Independent Inquiry into Child Sexual Abuse (ICSA) (2017) [Guidance Note: Retention Instructions and Data Protection requirements \(PDF\)](#) [Accessed 04/12/2017].

Information and Records Management Society (IRMS) (2016) [Information management toolkit for schools version 5 \(PDF\)](#). [Macclesfield]: IRMS

Information Commissioner's Office (2017a) [Guide to the Data Protection Act](#) [Accessed 04/12/2017].

Information Commissioner's Office (2017b) [Guide to the General Data Protection Regulation \(GDPR\)](#), [Accessed 04/12/2017].

## Whistleblowing

Whistleblowing is when someone reports wrongdoing that is in the public interest. This is usually something they've seen at work but not always. The wrongdoing might have happened in the past, be happening now, or be something the whistleblower is concerned may happen in the near future (Gov.uk, 2018).

The NSPCC Whistleblowing Advice Line offers free advice and support to professionals with concerns about how child protection issues are being handled in their own or another organisation.

Contact the Whistleblowing Advice Line on:

- [0800 028 0285](tel:08000280285)
- [help@nspcc.org.uk](mailto:help@nspcc.org.uk)

Contact the Whistleblowing Advice Line if:

- your or another organisation doesn't have clear safeguarding procedures to follow
- concerns aren't dealt with properly or may be covered up
- a concern that was raised hasn't been acted upon
- you are worried that repercussions are likely to arise if you raise a concern.

This applies to incidents that happened in the past, are happening now, or may happen in the future.

## Whistleblowing Policy

### Key Points

The Whistleblowing Procedure sets out the framework for dealing with allegations of illegal and improper conduct.

Adfam is committed to the highest standards of transparency, probity, integrity and accountability.

This procedure is intended to provide a means of making serious allegations about standards, conduct, financial irregularity, child or adult safeguarding practice or possible unlawful action in a way that will ensure confidentiality and protect those making such allegations in the reasonable belief that it is in the public interest to do so from being victimised, discriminated against or disadvantaged.

This procedure does not replace other policies and procedures such as the complaints procedure, the Grievance and Harassment and Bullying Policies and other specifically laid down statutory reporting procedures.

This procedure is intended to ensure that Adfam complies with its duty under the Public Interest Disclosure Act 1998.

### Scope

This procedure applies to all Adfam employees and volunteers, including contractors and interns.

This procedure does not replace other Adfam policies or procedures. For example, if an employee has a grievance about their working conditions they should use the Adfam Grievance Policy or, if



they felt that their manager or a colleague was treating them unfavourably, they should use the Adfam Harassment and Bullying Policy. Similarly if an employee has a concern about the conduct of a fellow employee in the working environment (e.g. that they are not treating colleagues with respect) they should raise these with their line manager, or if that is not possible, with the CEO, Chair of Trustees or through the Charity Commission's whistle blowing policy

[whistleblowing@charitycommission.gsi.gov.uk](mailto:whistleblowing@charitycommission.gsi.gov.uk)

This procedure applies to, but is not limited to, allegations about any of the following:

- Conduct which is an offence or breach of the law
- Alleged miscarriage of justice
- Serious Health and Safety risks
- The unauthorised use of public funds
- Possible fraud and corruption
- Abuse of any description, or bullying or intimidation of employees, customers or service users
- Breaches in safeguarding standards
- Abuse of authority
- Other unethical conduct

## **Reporting**

Contact Details for Reporting: (in writing) Viv Evans, [v.evans@adfam.org.uk](mailto:v.evans@adfam.org.uk) (CEO) or

Paul Hayes, [pauljohnhayes@hotmail.co.uk](mailto:pauljohnhayes@hotmail.co.uk) (Chair of the Board)

Adfam recognises that the decision to make an allegation can be a difficult one to make. However, whistleblowers who make serious allegations in the reasonable belief that it is in the public interest to do so have nothing to fear because they are doing their duty either to Adfam and/or to those for whom Adfam or they are providing a service.

Adfam will take appropriate action to protect a whistleblower from any reprisals, harassment or victimisation, where they make a serious allegation in the reasonable belief that it is in the public interest to do so.

## **Confidentiality**

All allegations will be treated in confidence and every effort will be made not to reveal a whistleblower's identity unless the whistleblower otherwise requests. However, if the matter is subsequently dealt with through other Adfam procedures such as the Disciplinary Procedure, this confidentiality commitment will not apply.

Similarly, if the allegation results in court proceedings then the whistleblower may have to give evidence in open court if the case is to be successful.

Adfam will not, without the whistleblower's consent, disclose the identity of a whistleblower to anyone other than a person involved in the investigation/allegation.

## **Anonymous Allegations**

This procedure encourages whistleblowers to put their name to an allegation wherever possible as anonymous allegations may often be difficult to substantiate/prove. Allegations made anonymously

are much less powerful but anonymous allegations will be considered at the discretion of the Chair of the Board.

In exercising discretion to accept an anonymous allegation the factors to be taken into account:

- The seriousness of the issue raised
- The credibility of the allegation; and
- Whether the allegation can realistically be investigated from factors or sources other than the complainant

### **Untrue Allegations**

No disciplinary or other action will be taken against a whistleblower who makes an allegation in the reasonable belief that it is in the public interest to do so even if the allegation is not substantiated by an investigation. However, disciplinary action may be taken against a whistleblower who makes an allegation without reasonable belief that it is in the public interest to do so (e.g. making an allegation frivolously, maliciously or for personal gain where there is no element of public interest).

### **Procedure for Making an Allegation**

It is preferable for allegations to be made to an employee's immediate manager to whom they report. However, this may depend on the seriousness and sensitivity of the issues involved and who is suspected of the malpractice. For example, if the whistleblower believes that management is involved it would be inappropriate to raise it directly with them. The whistleblower may then make an allegation direct to any of the following:

- The CEO
- The Chair of the Board

If either of the above receive an allegation he/she will consider the allegation and may discuss with trustees. The line manager (or either/or both) of the above, after consideration, will discuss with the whistleblower and if they wish to proceed, the allegation will be investigated.

### **Allegation**

Whether a written or oral report is made it is important that relevant information is provided including:

- The name of the person making the allegation and a contact point.
- The background and history of the allegation (giving relevant dates and names and positions of those who may be in a position to have contributed to the allegation);
- The specific reason for the allegation. Although someone making an allegation will not be expected to prove the truth of any allegations, they will need to provide information to the person they have reported to, to establish that there are reasonable grounds for the allegation.

Someone making an allegation may be accompanied by another person of their choosing during any meetings or interviews in connection with the allegation. However, if the matter is subsequently dealt with through another procedure the right to be accompanied will, at that stage, be in accordance with the relevant procedure.

### **Action on receipt of an Allegation**

The line manager will record details of the allegation gathering as much information as possible, (within 5 working days of receipt of the allegation) including:

- The record of the allegation:
- The acknowledgement of the allegation;
- Any documents supplied by the whistleblower

The investigator will ask the whistleblower for his/her preferred means of communication and contact details and use these for all communications with the whistleblower in order to preserve confidentiality.

If the allegation relates to fraud, potential fraud or other financial irregularity the Treasurer will be informed within 5 working days of receipt of the allegation. The Treasurer will determine whether the allegation should be investigated and the method of investigation. If the allegation relates to the Treasurer, the Chair of the Board will determine whether the allegation should be investigated and the method of investigation.

If the allegation discloses evidence of a criminal offence it will immediately be reported to the Board of Trustees and a decision will be made as to whether to inform the Police. If the allegation concerns suspected harm to children the appropriate authorities will be informed immediately.

If the issue is around suspected harm to children, the Safeguarding Children policy should be referred to.

### **Timetable**

An acknowledgement of the allegation will be made in writing within 10 working days with:

- An indication of how Adfam propose to deal with the matter
- An estimate of how long it will take to provide a final response
- An indication of whether any initial enquiries have been made
- Information on whistleblower support mechanisms
- Indication whether further investigations will take place and if not, why not

Where the allegation has been made internally and anonymously, obviously Adfam will be unable to communicate what action has been taken.

### **Support**

Adfam will take steps to minimise any difficulties which may be experienced as a result of making an allegation. For instance, if a whistleblower is required to give evidence in criminal or disciplinary proceedings Adfam will arrange for them to receive advice about the procedure and advise on the support mechanisms that are available.

Adfam accepts that whistleblowers need to be assured that the matter has been properly addressed. Thus, subject to legal constraints, we will inform those making allegations of the outcome of any investigation.

### **Responsibility for the Procedure**

The CEO and Chair of Trustees have overall responsibility for the operation of this Procedure and for determining the administrative processes to be followed and the format of the records to be kept.

### **Monitoring**

A Register will record the following details:

- The name and status (e.g. employee) of the whistleblower
- The date on which the allegation was received
- The nature of the allegation
- Details of the person who received the allegation
- Whether the allegation is to be investigated and, if yes, by whom
- The outcome of the investigation
- Any other relevant details

The Register will be confidential and only available for inspection by the Board of Trustees.

The CEO will report whistleblowing allegations to the Board of Trustees. The report will be in a form which does not identify whistleblowers.

## **APPENDIX B**

### **APPENDIX D**

## **Complaints Procedure**

Adfam has a separate complaints policy. It is contained within the Adfam Policies Manual.

If the complaint leads to any suspicion that a criminal offence may have been committed, the complaint should be referred to the Police **BEFORE** any further investigation is carried out. They will refer to Social Services if required.

Adfam's office is based within the London Borough of Camden. And the nearest station is:

### **Holborn Police Station**

10 Lambs Conduit St

London WC1N 3NR

Tel: 0208 721 2692

A complaint that leads to a suspicion of abuse of a vulnerable adults, regardless of perceived criminality, will be referred to the local safeguarding team, as outlined in this policy.

## Appendix A – Definitions and Indicators of Abuse

The following website provides useful information about the signs and symptoms of abuse-see link below

<https://www.scie.org.uk/safeguarding/adults/introduction/types-and-indicators-of-abuse>

The information makes it clear that abuse is not always obvious, and that there are many reasons why vulnerable adults may not tell anyone that they are being abused. They might not even realise that what is happening to them is abusive.

Many of the signs that suggest abuse may also be caused by other issues, and often it is a case of investigating agencies needing to build up a picture of an individual's life by piecing together information held by different individuals and organisations.

It is also important to point out that vulnerable adults can experience various types of abuse at the same time. For example, all abuse involves an element of emotional abuse, and neglect often occurs in contexts where individuals are also being subjected to physical or sexual abuse.

### Physical abuse

Types of physical abuse

- Assault, hitting, slapping, punching, kicking, hair-pulling, biting, pushing
- Rough handling
- Scalding and burning
- Physical punishments
- Inappropriate or unlawful use of restraint
- Making someone purposefully uncomfortable (e.g. opening a window and removing blankets)
- Involuntary isolation or confinement
- Misuse of medication (e.g. over-sedation)
- Forcible feeding or withholding food
- Unauthorised restraint, restricting movement (e.g. tying someone to a chair)

Possible indicators of physical abuse

- No explanation for injuries or inconsistency with the account of what happened
- Injuries are inconsistent with the person's lifestyle
- Bruising, cuts, welts, burns and/or marks on the body or loss of hair in clumps
- Frequent injuries
- Unexplained falls
- Subdued or changed behaviour in the presence of a particular person
- Signs of malnutrition

- Failure to seek medical treatment or frequent changes of GP

### **Domestic violence or abuse**

Types of domestic violence or abuse

Domestic violence or abuse can be characterised by any of the indicators of abuse outlined in this briefing relating to:

- psychological
- physical
- sexual
- financial
- emotional.

Domestic violence and abuse includes any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been, intimate partners or family members regardless of gender or sexuality. It also includes so called 'honour' -based violence, female genital mutilation and forced marriage.

Coercive or controlling behaviour is a core part of domestic violence. Coercive behaviour can include:

- acts of assault, threats, humiliation and intimidation
- harming, punishing, or frightening the person
- isolating the person from sources of support
- exploitation of resources or money
- preventing the person from escaping abuse
- regulating everyday behaviour.

Possible indicators of domestic violence or abuse

- Low self-esteem
- Feeling that the abuse is their fault when it is not
- Physical evidence of violence such as bruising, cuts, broken bones
- Verbal abuse and humiliation in front of others
- Fear of outside intervention
- Damage to home or property
- Isolation – not seeing friends and family
- Limited access to money

### **Sexual abuse**

Types of sexual abuse

- Rape, attempted rape or sexual assault
- Inappropriate touch anywhere
- Non- consensual masturbation of either or both persons
- Non- consensual sexual penetration or attempted penetration of the vagina, anus or mouth
- Any sexual activity that the person lacks the capacity to consent to
- Inappropriate looking, sexual teasing or innuendo or sexual harassment
- Sexual photography or forced use of pornography or witnessing of sexual acts
- Indecent exposure

#### Possible indicators of sexual abuse

- Bruising, particularly to the thighs, buttocks and upper arms and marks on the neck
- Torn, stained or bloody underclothing
- Bleeding, pain or itching in the genital area
- Unusual difficulty in walking or sitting
- Foreign bodies in genital or rectal openings
- Infections, unexplained genital discharge, or sexually transmitted diseases
- Pregnancy in a woman who is unable to consent to sexual intercourse
- The uncharacteristic use of explicit sexual language or significant changes in sexual behaviour or attitude
- Incontinence not related to any medical diagnosis
- Self-harming
- Poor concentration, withdrawal, sleep disturbance
- Excessive fear/apprehension of, or withdrawal from, relationships
- Fear of receiving help with personal care
- Reluctance to be alone with a particular person

#### **Psychological or emotional abuse**

##### Types of psychological or emotional abuse

- Enforced social isolation – preventing someone accessing services, educational and social opportunities and seeing friends
- Removing mobility or communication aids or intentionally leaving someone unattended when they need assistance
- Preventing someone from meeting their religious and cultural needs
- Preventing the expression of choice and opinion



- Failure to respect privacy
- Preventing stimulation, meaningful occupation or activities
- Intimidation, coercion, harassment, use of threats, humiliation, bullying, swearing or verbal abuse
- Addressing a person in a patronising or infantilising way
- Threats of harm or abandonment
- Cyber bullying

#### Possible indicators of psychological or emotional abuse

- An air of silence when a particular person is present
- Withdrawal or change in the psychological state of the person
- Insomnia
- Low self-esteem
- Uncooperative and aggressive behaviour
- A change of appetite, weight loss/gain
- Signs of distress: tearfulness, anger
- Apparent false claims, by someone involved with the person, to attract unnecessary treatment

#### **Financial or material abuse**

##### Types of financial or material abuse

- Theft of money or possessions
- Fraud, scamming
- Preventing a person from accessing their own money, benefits or assets
- Employees taking a loan from a person using the service
- Undue pressure, duress, threat or undue influence put on the person in connection with loans, wills, property, inheritance or financial transactions
- Arranging less care than is needed to save money to maximise inheritance
- Denying assistance to manage/monitor financial affairs
- Denying assistance to access benefits
- Misuse of personal allowance in a care home
- Misuse of benefits or direct payments in a family home
- Someone moving into a person's home and living rent free without agreement or under duress

- False representation, using another person's bank account, cards or documents
- Exploitation of a person's money or assets, e.g. unauthorised use of a car
- Misuse of a power of attorney, deputy, appointeeship or other legal authority
- Rogue trading – eg. unnecessary or overpriced property repairs and failure to carry out agreed repairs or poor workmanship

#### Possible indicators of financial or material abuse

- Missing personal possessions
- Unexplained lack of money or inability to maintain lifestyle
- Unexplained withdrawal of funds from accounts
- Power of attorney or lasting power of attorney (LPA) being obtained after the person has ceased to have mental capacity
- Failure to register an LPA after the person has ceased to have mental capacity to manage their finances, so that it appears that they are continuing to do so
- The person allocated to manage financial affairs is evasive or uncooperative
- The family or others show unusual interest in the assets of the person
- Signs of financial hardship in cases where the person's financial affairs are being managed by a court appointed deputy, attorney or LPA
- Recent changes in deeds or title to property
- Rent arrears and eviction notices
- A lack of clear financial accounts held by a care home or service
- Failure to provide receipts for shopping or other financial transactions carried out on behalf of the person
- Disparity between the person's living conditions and their financial resources, e.g. insufficient food in the house
- Unnecessary property repairs

#### **Modern slavery**

##### Types of modern slavery

- Human trafficking
- Forced labour
- Domestic servitude
- Sexual exploitation, such as escort work, prostitution and pornography
- Debt bondage – being forced to work to pay off debts that realistically they never will be able to

#### Possible indicators of modern slavery

- Signs of physical or emotional abuse
- Appearing to be malnourished, unkempt or withdrawn
- Isolation from the community, seeming under the control or influence of others
- Living in dirty, cramped or overcrowded accommodation and or living and working at the same address
- Lack of personal effects or identification documents
- Always wearing the same clothes
- Avoidance of eye contact, appearing frightened or hesitant to talk to strangers
- Fear of law enforcers

#### [Further Home Office information on identifying and reporting modern slavery](#)

#### **Discriminatory abuse**

##### Types of discriminatory abuse

- Unequal treatment based on age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex or sexual orientation (known as ['protected characteristics' under the Equality Act 2010](#))
- Verbal abuse, derogatory remarks or inappropriate use of language related to a protected characteristic
- Denying access to communication aids, not allowing access to an interpreter, signer or lip-reader
- Harassment or deliberate exclusion on the grounds of a protected characteristic
- Denying basic rights to healthcare, education, employment and criminal justice relating to a protected characteristic
- Substandard service provision relating to a protected characteristic

##### Possible indicators of discriminatory abuse

- The person appears withdrawn and isolated
- Expressions of anger, frustration, fear or anxiety
- The support on offer does not take account of the person's individual needs in terms of a protected characteristic

#### **Organisational or institutional abuse**

##### Types of organisational or institutional abuse

- Discouraging visits or the involvement of relatives or friends
- Run-down or overcrowded establishment

- Authoritarian management or rigid regimes
- Lack of leadership and supervision
- Insufficient staff or high turnover resulting in poor quality care
- Abusive and disrespectful attitudes towards people using the service
- Inappropriate use of restraints
- Lack of respect for dignity and privacy
- Failure to manage residents with abusive behaviour
- Not providing adequate food and drink, or assistance with eating
- Not offering choice or promoting independence
- Misuse of medication
- Failure to provide care with dentures, spectacles or hearing aids
- Not taking account of individuals' cultural, religious or ethnic needs
- Failure to respond to abuse appropriately
- Interference with personal correspondence or communication
- Failure to respond to complaints

#### Possible indicators of organisational or institutional abuse

- Lack of flexibility and choice for people using the service
- Inadequate staffing levels
- People being hungry or dehydrated
- Poor standards of care
- Lack of personal clothing and possessions and communal use of personal items
- Lack of adequate procedures
- Poor record-keeping and missing documents
- Absence of visitors
- Few social, recreational and educational activities
- Public discussion of personal matters
- Unnecessary exposure during bathing or using the toilet
- Absence of individual care plans
- Lack of management overview and support

#### **Neglect and acts of omission**

##### Types of neglect and acts of omission

- Failure to provide or allow access to food, shelter, clothing, heating, stimulation and activity, personal or medical care
- Providing care in a way that the person dislikes
- Failure to administer medication as prescribed
- Refusal of access to visitors
- Not taking account of individuals' cultural, religious or ethnic needs
- Not taking account of educational, social and recreational needs
- Ignoring or isolating the person
- Preventing the person from making their own decisions
- Preventing access to glasses, hearing aids, dentures, etc.
- Failure to ensure privacy and dignity

#### Possible indicators of neglect and acts of omission

- Poor environment – dirty or unhygienic
- Poor physical condition and/or personal hygiene
- Pressure sores or ulcers
- Malnutrition or unexplained weight loss
- Untreated injuries and medical problems
- Inconsistent or reluctant contact with medical and social care organisations
- Accumulation of untaken medication
- Uncharacteristic failure to engage in social interaction
- Inappropriate or inadequate clothing

#### **Self-neglect**

##### Types of self-neglect

- Lack of self-care to an extent that it threatens personal health and safety
- Neglecting to care for one's personal hygiene, health or surroundings
- Inability to avoid self-harm
- Failure to seek help or access services to meet health and social care needs
- Inability or unwillingness to manage one's personal affairs

##### Indicators of self-neglect

- Very poor personal hygiene
- Unkempt appearance

- Lack of essential food, clothing or shelter
- Malnutrition and/or dehydration
- Living in squalid or unsanitary conditions
- Neglecting household maintenance
- Hoarding
- Collecting a large number of animals in inappropriate conditions
- Non-compliance with health or care services
- Inability or unwillingness to take medication or treat illness or injury

## Appendix 2 – Safeguarding Procedures Flowchart

